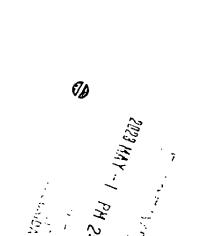
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A. Jones



FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

05/01/23

NAME:

DISTRIBUTED ENERGY INFRASTRUCTURE LLC

TYPE OF FILING: APPLICATION

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:	Registration Section Division of Corporations		
SHRII	Distributed Energy Infrastructure LLC		
3004	Nan	ne of Limited Liability Company	
		Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.	
Please	return all correspondence concerning this matter	to the following:	
	4	Name of Person	
	Distributed Energy Infrastructure LL	C	
		Firm/Company	
	1227 SW Robys Way		
		Address	
	Palm City, Florida 34990		
		City/State and Zip Code	
	sharrington@distributedei.com		
	E-mail address: (to b	e used for future annual report notification)	
For fur	ther information concerning this matter, please ca	dl:	
Sean Harrington		603 903-5484	
	Name of Contact Person	at () Area Code Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	Enclosed is a check for the following amount: Please make check payable to: FI.ORIDA DEF ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fe Certificate of	ee & 🔲 \$155.00 Filing Fee & 🖂 \$160.00 Filing Fee, Certificate	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate	name adopted for the purpose of transacting business in F	orida. The alter	nate name must include "	Limited Liab	ulity Company."	"L. L. C," or "Ll	l,C,")
Delaware		3					
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	<i>3.</i>		(FEI number	, il applicable)		
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration.) ne penalty liabi	hty)				
1227 SW Robys Way		6.	27 SW Robys Wa	У			
treet Address of Principal Office)			(Mailing Address)				
Palm City Florida 3499	90	Pal	m City Florida 34	1990			
Name and street address	ss of Florida registered agent: (P.O. Box	NOT acce	ptable)	•	SEC. 35	2023 HAY -	<u> </u>
Name:	Paracorp Incorporated		_				
Office Address:	155 Office Plaza Drive, 1st Floor				, ,		
	Tallahassee		3230 , Florida	01	63	; <u>~</u>	
	(City)			p code)			

(Registered agent's signature)

Please see attached.

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Name and Address: Title or Capacity: Name and Address:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: Sean Harrington	□Manager	Name: Kamlesh Patel
□Member	Address: 1227 SW Robys Way	□Member	Address:
Authorized	Palm City Florida 34990	□Authorized	Building #5, Suite 205
Person		Person	North Billerica, MA 01862
□Other	Other	ExOtherBoard Cl	nair Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	□Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Sen Wither		
X	Signature of an authorized person	
Sean W. Harrington		
	Typed or printed name of signee	

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 5/1/2023

ENTITY NAME: Distributed Energy Infrastructure LLC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DISTRIBUTED ENERGY INFRASTRUCTURE LLC"

IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF APRIL, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DISTRIBUTED ENERGY INFRASTRUCTURE LLC" WAS FORMED ON THE EIGHTH DAY OF SEPTEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 203136299

Date: 04-13-23

7018285 8300 SR# 20231433921